



#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Applicant** 

Goddard, et al. (as amended)

Appl. No.

10/063,617

Filed

May 3, 2002

For

SECRETED AND

**TRANSMEMBRANE** 

POLYPEPTIDES AND NUCLEIC ACIDS ENCODING THE SAME

Examiner

Romeo, David S.

Group Art Unit

1647

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

September 23, 2005 (Date)

AnneMarie Kaiser, Reg. No. 37,649

## **AMENDMENT AFTER FINAL**

## Mail Stop AF

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Please amend the application as follows.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 4 of this paper.

Docket No.: GNE.3230R1C85

Page 1 of 2 TFW

# Please Direct All Correspondence to Customer Number 30313

SEP 2 6 2005

#### AMENDMENT / RESPONSE TRANSMITTAL

pplicant

Goddard, et al.

App. No

10/063,617

Filed

: May 3, 2002

For

SECRETED AND

TRANSMEMBRANE POLYPEPTIDES

AND NUCLEIC ACIDS EENCODING

THE SAME

Examiner

Romeo, David S.

Art Unit

1647

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

September 23, 2005

(Pate)

AnneMarie Kaiser, Reg. No. 37,649

## Mail Stop AF

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

# (X) Amendment After Final in 4 pages.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Excess Claims > 20	10 - 20 = 0	1202 (\$50)	0   x   50 =	\$0
Independent > 3	2 - 3 = 0	1201 (\$200)	0 x 200 =	\$0
Multiple Claim	1.16(j)	1203 (\$360)		\$0
1 Month Extension	1.17(a)(1)	1251 (\$120)		\$
2 Month Extension	1.17(a)(2)	1252 (\$450)		\$
3 Month Extension	1.17(a)(3)	1253 (\$1,020)		\$
			TOTAL FEE DUE	\$0

(X) Return prepaid postcard.

Docket No.: GNE.3230R1C85 September 23, 2005 App. No.: 10/063,617 Page 2 of 2

# Please Direct All Correspondence to Customer Number 30313

(X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

AnneMarie Kaiser

Registration No. 37,649

Attorney of Record Customer No. 30,313

(619) 235-8550

1950676 092305